CONGRATULATING UF'S WOMEN'S TENNIS TEAM

HON. CLIFF STEARNS

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 18, 2003

Mr. STEARNS. Mr. Speaker, it is with great pleasure that I rise today to recognize the 2003 University of Florida women's tennis team, for achieving the highest honor in collegiate play, the NCAA title. The Gators upset the top-ranked and two time defending champion Stanford in front of a spirited sellout crowd at Linder Stadium at Ring Tennis Complex in Gainesville, Florida.

This week the University of Florida women's tennis team has been invited to The White House to participate in the 2003 NCAA Spring Sports Championship Day, recognizing the NCAA team champions from the 2003 spring season. The 2003 Gator team will be UF's fourth national championship team to visit The White House, joining the 1996 football team, the 1998 soccer and 1998 women's tennis teams. I congratulate the Women's Tennis Team on their exceptional 2003 season and wish them the best of luck in 2004. Go Gators!

PERSONAL EXPLANATION

HON. LUIS V. GUTIERREZ

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 18, 2003

Mr. GUTIERREZ. Mr. Speaker, I was unavoidably absent from this Chamber on May 13, 2003. I would like the record to show that, had I been present, I would have voted "yea" on rollcall votes 183, 184, and 185. On May 19, 2003, I was also unavoidably absent from this Chamber. I would like the record to show that had I been present, I would have voted "yea" on rollcall votes 192, 193, and 194. Furthermore, I was absent from this Chamber on May 23, 2003, and had I been present in this Chamber, I would have voted "nay" on rollcall vote 226.

TRIBUTE TO DR. MARGARET ALLEN, DR. RAMONCITA (RAYE) MAESTAS, AND DR. CHRISTINE SURAWICZ

HON. JIM McDERMOTT

OF WASHINGTON

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 18, 2003

Mr. McDERMOTT. Mr. Speaker, I rise today to pay tribute to three outstanding physicians, Dr. Margaret Allen, Dr. Ramoncita (Raye) Maestas, and Dr. Christine Surawicz, who have been nominated for the Local Legends project, sponsored by the American Medical Women's Association and the National Library of Medicine, to celebrate the lives and achievements of America's women physicians around the country.

Dr. Allen currently is Medical Director at the Hope Heart Institute in Seattle, where she conducts promising research on tissue repair and remodeling in cardiovascular disease, and cardiovascular gene therapy.

Dr. Allen is a pioneer in the field of cardio-vascular disease. A cardiothoracic surgeon by training, she was recruited in 1985 by the University of Washington to develop and head its cardiac transplant service. This program received accreditation under Dr. Allen's leadership, and it has been a strong regional asset for many years. Dr. Allen served as director of the program from 1985 to 1996, and also directed the Pediatric Cardiac Transplant Program at Children's Hospital and Regional Medical Center.

Dr. Allen has been active in numerous professional and non-profit organizations throughout her career. Among other positions, she has served as President of the United Network for Organ Sharing (UNOS). Dr. Allen has worked diligently to improve access to organ transplantation and to diminish disparities in access across communities.

Dr. Maestas is a family physician at Harborview Medical Center in Seattle, and a member of the faculty at the University of Washington School of Medicine. Dr. Maestas has dedicated her professional career to caring for the medically underserved. Following her residency, Dr. Maestas practiced at the SeaMar Clinic, a federally qualified health center serving a largely Hispanic population. She then practiced and taught at the Providence Family Practice Residency Program within the Providence health care system, which has a long history of charitable care in the Seattle area. Her current practice site, the Harborview Medical Center, provides much of the safety net care to Seattle and King County residents.

Dr. Maestas is a distinguished educator. She serves on the faculty at Providence and the University of Washington, and is a leader in developing the new medical school curriculum at the University of Washington. Dr. Maestas also has made significant contributions to the community. Her prominent work on issues of domestic violence and cultural competency has gained her national recognition.

Dr. Surawicz is a gastroenterologist and faculty member at the University of Washington School of Medicine in Seattle. Dr. Surawicz has distinguished herself as a clinician, educator, researcher and administrator throughout her career at the University of Washington. She has directed the Gastroenterology Department since 1981, and since 1993 has served as Section Chief of Gastroenterology at Harborview Medical Center, which serves Seattle and King County. In 2002, Dr. Surawicz was appointed Assistant Dean for Faculty Development in the School of Medicine, a measure of the regard for her leadership among her peers.

Dr. Surawicz is widely recognized in her field of gastroenterology. She has published extensively in national and international peerreviewed journals, and has held several board-level positions in national organizations, including service as President of the American College of Gastroenterology, and as Chair of the FDA's Gastrointestinal Drug Advisory Council.

I am honored to announce the selection of these physicians, nominated by their peers, each of whom has made significant contributions to her field of medicine and to her community. These extraordinary women are to be congratulated for their years of dedication and hard work. I ask my colleagues to join me today saluting Dr. Margaret Allen, Dr.

Ramoncita (Raye) Maestas, and Dr. Christine Surawicz for their service and commitment to their profession and to our community.

CHARITABLE GIVING ACT, H.R. 7

HON. MARK E. SOUDER

OF INDIANA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, November 18, 2003

Mr. SOUDER. Mr. Speaker, why are we holding the poor hostage?

Earlier this year, both the House and the Senate overwhelmingly passed legislation that would provide non-itemizers the ability to claim a tax deduction for charitable giving. Yet here we are nearing the end of this session, and have yet to see a conference committee take up the legislation. Instead we have seen a great deal of negative rhetoric designed not to help the poor of our nations, but to advance individual political goals.

The money for social services needs to get into the hands of the men and women who are making the biggest impact on the lives of their communities. If we in Congress are to be good stewards of the public trust, we have to be certain that the money we dedicate for social services goes into the hands of the most effective organizations. To do otherwise would be a violation of the public's trust in us.

What we are talking about with the Charitable Giving Act, however, is not a case where we as the Congress have to make a decision about where the money should go. This legislation allows individuals across the nation to make those decisions. Who better to identify a communities needs, and the organizations that are most effectively addressing those needs, than the men and women who live and work in that community? I believe that the best way we can help the faith-based and community organizations who need financial assistance is to encourage private sector philanthropy for all individuals who contribute to charitable organizations, not just for those who itemize their tax returns. Approximately two-thirds of tax returns filed do not claim itemized deductions; therefore those individuals are unable to deduct their charitable giving. The majority of nonitemizers are low- and middle-income taxpavers These are the very taxpavers who would benefit from the Charitable Giving Act. and these are the very people are our best indicator of the effectiveness of an organization.

This legislation also has included a \$150 million authorization for the Compassion Capital Fund. This authorization recognizes the unique contributions of smaller community and faith-based service organizations by making it possible for these organizations to obtain a grant that they can use to expand their impact on their neighborhoods. Many of our neighborhood service organizations do not possess the capacity to manage a million dollar grant. This does not mean that these smaller organizations are not effective. On the contrary, they may be the best organizations in town. Through the Compassion Capital Fund, intermediaries are able to issue smaller grants, and provide technical assistance that will allow more organizations the ability to increase their services to the poor.

The Charitable Giving Act contains, in large part, what I believe are the most significant ways the Federal Government can lend its